CITY OF BELOIT DIVISION OF HOUSING SERVICES

REQUEST FOR EXTENSION OF TIME

(Inspector's name) ((Nature of violation and/or violation #)
for the property located at	, Beloit, WI.
I am requesting an additional	days to comply with the original orders.
Reason for Request:	
Compliance Date (to be determined by Inspector):	
I understand that compliance of the original orders	
has lapsed with the above written agreement. I fur	± •
agreement will result in citations being issued or of Beloit.	ther appropriate legal action being taken by
of Beloft.	
···	
Signature of Applicant Phone num	nber Date Signed
	nber Date Signed
	nber Date Signed
Signature of Applicant Phone num Print Name of Applicant	nber Date Signed
Signature of Applicant Phone num	nber Date Signed
Signature of Applicant Phone num Print Name of Applicant	Date Signed Zip
Signature of Applicant Phone num Print Name of Applicant Address	
Signature of Applicant Phone num Print Name of Applicant Address	

Beloit, WI 53511 (608)364-6650